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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 129 LAKE AVENUE, LI	C. e of Limited Liability Company
	lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this mate	ter to the following:
FREDERIC BARTHE ES	Q.
	Name of Person
	Firm/Company
1 E. BROWARD BLVD.,	SUITE 700
	Address 33301 2 2 7
FORT LAUDERDALE, FL	33301
	City/State and Zip Code
FMB@BARTHE-LEIGI	H COM
	be used for future annual report notification)
For further information concerning this matter, please	e call:
F. BARTHE	at (954) 523-5555
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amoun \$\sqrt{125.00 Filing Fee}\$ \text{S130.00 Filing Fee} \text{Certificate of Statu}	& \$\int\\$155.00 \text{ Filing Fee & \$\int\\$160.00 \text{ Filing Fee, Certificate}

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 129 LAKE AVENUE, LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. NEW YORK (Jurisdiction under the law of which foreign limited liability company is organized) 3. APPLIED FOR (FEI number, if applicable)
4. 12/24/2008 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 5 DEERFOOT LANE, YONKERS, NY 10710 (Street Address of Principal Office)
(Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows: MICHAEL MORLEY: 5 DEERFOOT LANE, YONKERS, NY 10710
ELEN MORLEY: 5 DEERFOOT LANE, YONKERS, NY 10710
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
REAL ESTATE HOLDING.
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the

FREDERIC M. BARTHE, ESQ.

Typed or printed name of signee

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
129 LAKE AVENUE, LLC.	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
FREDERIC BARTHE PA (Name)	2011 - A.C.
1 E. BROWARD BLVD., STE 700	2011 MAY 31 ALLAMASSE
Florida Street Address (P.O. Box NOT ACCEPTABLE)	P P P
FORT LAUDERDALE FL 33301	\$ 25 E
City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

State of New York Department of State } ss:

I hereby certify, that 129 LAKE AVENUE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/24/2008, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 18th day of May two thousand and eleven.

First Deputy Secretary of State